

NOTICE OF GRANT AVAILABILITY

NAME OF GRANT PROGRAM:

Fetal Alcohol Syndrome Prevention

STATUTORY AUTHORITY:

N.J.S.A. 26:2B-32, Alcohol, Education,
Rehabilitation and Enforcement Fund

GRANT PROGRAM NO. 05-46-CHS

TYPE OF AWARDS TO BE ISSUED:

Cost-reimbursement Grants

PURPOSE FOR WHICH THE GRANT PROGRAM FUNDS WILL BE USED:

Development of Regional Projects which prevent alcohol and other drug use pre-pregnancy, during pregnancy and post-partum. This will be done through training of perinatal professionals and general public education, substance abuse risk screenings in prenatal clinics, intervention counseling of pregnant women and referral to addiction treatment programs. To increase the number of pregnant and preconceptional women screened for risk of substance use and abuse.

AMOUNT OF MONEY IN THE GRANT PROGRAM:

The availability of funds for this program is contingent on appropriation of funds to the department. Approximately \$500,000 is available in the grant program to fund awards for direct service. Approximately \$700,000 will be available to established Maternal and Child Health Consortia to fund coordination of risk reduction services.

ELIGIBLE APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

1. Terms and Conditions for the Administration of Grants.
2. General and specific Grant Compliance requirements issued by the Granting Agency.
3. Applicable Federal Cost Principles relating to the Applicant.

GROUP OR ENTITIES WHICH MAY APPLY FOR THE GRANT PROGRAM:

Service grants may be awarded to Perinatal Centers, Ambulatory Care Facilities, Local and County Health Departments. Established Maternal and Child Health Consortia.

QUALIFICATIONS NEEDED BY APPLICANT TO BE CONSIDERED FOR A GRANT:

Maternal and Child Health Consortia must demonstrate ability to provide coordination as specified by the Perinatal Health Services Program. Direct service providers must be able to comply with program specifications including ability to provide direct prenatal services and coordination with Maternal and Child Health Consortia.

APPLICATION PROCEDURES:

1. Contact Office of Director (see below).
2. Submit Letter of Intent to program.
3. Prepare grant application.

FOR INFORMATION CONTACT:

Office of the Director
Maternal , Child and Community Health Services
50 East State Street
P.O. Box 364
Trenton, NJ 08625-0364

TELEPHONE: (609) 984-0024

FAX: (609) 292-9288

E-MAIL:

DEADLINE BY WHICH APPLICATIONS MUST BE SUBMITTED:

Letter of Intent due to funding program February 1 for July grants and August 1 for January 1 grants.

DATE BY WHICH APPLICANT SHALL BE NOTIFIED WHETHER THEY WILL RECEIVE FUNDS:

Applicant will be notified 30 days prior to start date of grant.